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PATENT APPLICATION FEE DETERMINATION RECORD

PTO/SB/06(08-03)

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PATENT APPLICATION FEE DETERMINATION RECORD

Application availed OMB control number.

	PATER	PATENT APPLICATION FEE DETERMINATION RECORD Application of Information Unless it displays a valid OMB control Substitute for Form PTO-875 Application of Deskylds					
•	Substitute for Form PTO-875					Application or Docket Number	
	CLAIMS AS FILED - PART I					-016267	
	(Column 2) SMALL SUPPLY						
	BASIC FEE	NUMBER FILED	NUMBER EXTRA		TTY OR	OTHER THAN SMALL ENTITY	
`	(37 CFR 1.16(a)) TOTAL CLAIMS			RATE	FEE	RATE FFF	
. 1	(37 CFR 1.16(c))			5_	7	TATE FEE	
.	INDEPENDENT CLAIMS (37 CFR 1.16(b))	minus 20 =		x s=	OR		
. L	MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1 16(4))			X \$ =	OR	X \$	
			R 1.16(d))		OR	X \$=	
- 1	If the difference in column t	is less than zero, enter *0*	in column 2	TOTAL	OR	+ 5 =	
19	CLAIMS	AS AMENDED - PA	RTII		OR	TOTAL .	
1 /-	29-05 (Colum	mn 1) (Co	olumn 2) (Column 3)		•	7.	
	7 ' / 55	IMS HIG	HEST I	SMALL ENTITY	OR	OTHER THAN	
l X	123/05 AMEND	ER PREVI	MBER PRESENT	RATE ADDI		SMALL ENTITY	
N O	(37 CFR 1.16(c))	Minus C	FOR	TIONA		RATE ADDI.	
AMENDMENT	Independent (37 CFR 1.16(b))	Minus ***	4	x : 25 =	7 1	TIONAL	
\{	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) + \$/80=						
- 1 .				TOTAL		360=	
7.0	(Column		nn 2). (Column 3)	ADD'L FEE	OR ADD	L FEE	
5	CLAIMS REMAININ		ST	[· · · · · · · · · · · · · · · · · · ·	-		
	AFTER AMENDMENT	PREVIOUS PAID FO	SLY FXTRA	RATE ADDI	RA	75	
1 2 1 10	7 CFR 1.16(c))	Minús **	1	TIONAL FEE	```	TIONAL	
N N	CFR 1.16(b))	Minus ***	=	x : <u>Z</u> 5 =	OR X 5.5/	P - FEE	
₹ FIF	PRINST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) X \$ 100 = OR X \$ 200 = OR X \$						
1 .							
L	10-1			TOTAL ADD'L FEE	TOTAL		
	(Column 1) CLAIMS	(Column 2)			OR ADD'L FE	ie	
12	REMAINING AFTER	HIGHEST NUMBER	PRESENT				
	AMENDMENT	PREVIOUSLY PAID FOR	EXTRA	RATE ADDI- TIONAL	RATE	ADDI-	
Z Indepe	R 1.16(c)) endent 1.16(b))	. Minus ••	T=	FEE		TIONAL	
13/		Minus •••	1° 1		OR X:50=		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) X \$ 100 = OR X \$ 200 =							
T \$ / BU =							
TOTAL APPLY FEE							
TOTAL If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20". The "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20". The "Highest Number Previously Paid For" (Total or Independent) is the highest high set in the "3".							
The "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20". his collection of information is required by 37 OFS							

If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".

If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete application of time you require to complete this form and/or suggestions for reducing this bürden, should be sent to the Chief Information Officer, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450.

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